

**NMI Settlement Fund  
Document Checklist-Retiree's Benefits  
(Forms provided by Retiree)**

Member Name: \_\_\_\_\_

Initial

- |  |                          |
|--|--------------------------|
| 1 Application for Retirement Annuity (SF-2A)                         | <input type="checkbox"/> |
| 2 Application for Identification Card (SF-1G)                        | <input type="checkbox"/> |
| 3 Application & Authorization to Commence or Cease Allotment (SF-1F) | <input type="checkbox"/> |
| 4 W-4P Tax Withholding Certification                                 | <input type="checkbox"/> |
| 5 Health Insurance Enrollment Form                                   | <input type="checkbox"/> |
| 6 Life Insurance Enrollment Form                                     | <input type="checkbox"/> |
| 7 Election to Continue or Reject Life Insurance (SF-2F)              | <input type="checkbox"/> |
| 8 Authorization to Release Information (SF-2B)                       | <input type="checkbox"/> |
| 9 Election to Receive Five-Year Credit (SF-2H)                       | <input type="checkbox"/> |

NMISF Employee: \_\_\_\_\_

Date: \_\_\_\_\_